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Schools face speech pathologist shortage

HOUSTON (AP) — Some preschool teachers would do anything to keep their students quiet, but Phyllis Wilson's classroom is designed to get them talking. Her seven preschoolers have a variety of disabilities that leave them with low verbal skills. So she's worked with Houston school district speech-language pathologist Johanna Olson to create an environment that teases out their voices.



Johanna Olson speaks into a BIGmack voice recording device during a visit to Kate Bell Elementary school in Houston.

By David J. Phillip, AP

Unfortunately, school speech-language pathologists like Olson are in short supply nationwide, leaving many teachers struggling alone to meet students' speech needs.

The U.S. Bureau of Labor Statistics projects that the nation will need about 120,000 speech-language pathologists by 2012 to meet increasing demand and replace retiring workers. In 2002, about 94,000 speech-language pathologists were working nationwide; some 8,000 of those were licensed in Texas.

No one tracks how many now work in the state's schools, though Texas Speech-Language-Hearing Association President Lynn Flahive estimates it's about half. An association survey of 282 of the state's 1,037 districts found 60% were forced to fill vacancies with expensive contract workers or unlicensed assistants.

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Demand for speech-language pathologists has grown as more children have been diagnosed as needing speech therapy. That's due in part to improvements in diagnosing speech impairments and higher rates of autism, which along with Down syndrome and cerebral palsy causes most major speech problems.

But universities are having trouble recruiting and graduating enough students, who need master's degrees to be fully certified in most states.

"Basically there just aren't enough young people deciding speech-language pathology is the profession they want to pursue," said Cherry Wright, chairwoman of the Texas association's task force on public school job vacancies.

Schools also lose job candidates to more glamorous and higher-paying jobs at hospitals and rehabilitation centers, Wright said.

The federal Individuals with Disabilities Education Act requires school districts to have enough speech-language pathologists to meet the needs of every special education student requiring speech therapy.

If those services can't be provided during the day, districts must try to arrange sessions outside school or send the student to a private therapist.

One district struggling to meet speech pathologist needs is in Victoria. The district, about 120 miles southwest of Houston, could not replace the five pathologists who left after the last school year. Three retired and two took higher-paying jobs at other districts.

"We can't seem to entice the SLPs to come to the district and keep them here," said Barbara Mabry, Victoria's director of special services.

Victoria increased the annual stipend it offers speech-language pathologists on top of their salary from \$3,500 to \$5,000. Still unable to find qualified candidates, the district had to hire contract workers at about \$50 per hour, about \$20 more per hour than what staff pathologists make.

Many districts across the country turn to contract therapy companies. Tampa-based Progressus Therapy Inc. serves 120 districts in about 15 states, including Texas.

Progressus President John Hoey said it's easier for his company to recruit speech-language pathologists because it can offer jobs all over the country.

"It's very difficult for a school district in a very specific location to go out and be effective recruiting nationally," he said. "Every single day we are in the market trying to find therapists around the country. A school district can't do that."

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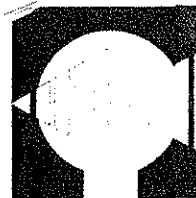
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From the President's Desk

by Lynn Spivak, Ph.D. President NYSSLHA

The Joy of Volunteering

Fall is here. Time to emerge from the summer miasma and focus on the work that lies ahead. For a NYSSLHA president, that work includes generating a

slate of willing and qualified candidates for board position elections that will be held next year. This is not necessarily a fun job. Convincing busy colleagues that they should give up any of their over-scheduled, precious time to serve their state organization is not always an easy sell.

I remember my own experience, 9 years ago, when I was first approached to run for a position on what was then called Executive Council. NYSSLHA had just been restructured and the new governance plan included a significant increase in audiology representation. Joe Montano was past president during this time and was especially enthusiastic about the new structure. As luck would have it, Joe and I were invited to attend a Department of Health Early Intervention meeting in Albany and, since we were both coming from Long Island, decided to drive together. The first half of the trip to Albany was dominated by Joe's very animated discussion about NYSSLHA and big plans for the future of the state organization. I remember nodding a lot, concentrating more on the road than on the future of NYSSLHA. Finally Joe turned to me and said, "Lynn, you're not getting it, are you?" Apparently I wasn't. He replied, "I want you to run for a position on the board!" It was definitely a "duh" experience; it never even occurred to me that,

- 1) I had the experience or skill to represent the audiologists of New York on the NYSSLHA board and,
- 2) That I could ever manage to carve out enough time from my crazy schedule to do it.

To make a long story (and even longer car ride) short, by

The story of Joe and the long car ride became a NYSSLHA legend. It turns out that there are a lot of past and present NYSSLHA board members who have had similar experiences during a car ride they shared with Joe. Many other people who never considered a leadership role because they were just too busy with work, family and assorted other responsibilities, found that not only were they able to serve NYSSLHA but that the rewards, both professional and personal, far outweighed the effort. Now I am in the position of convincing a few good people to join us and work for NYSSLHA, I can appreciate the hard job that Joe and others in our position had. Unfortunately, the high price of gas makes long car rides a poor option for recruiting. So, I am hoping that one or several of you reading this column will wake up and realize "Hey, that could be me serving on the board."

The days of the fabled NYSSLHA "in crowd" are long gone. Leadership positions are open to all members who have the desire and commitment to move our agenda forward. Don't worry about experience and skills: we will train! I encourage ANYONE who has even an inkling of an interest in a future board position to give me or any other current board member a call or send an email and find out more. This could be the beginning of a very rich and rewarding experience that you will cherish throughout your professional life.

This would be an appropriate time to thank all of our current board members who have been so generous in volunteering their talents and energy to serve speech language pathologists and audiologists in New York. Thank you also to those of you who already stepped forward and put your hats in the ring to run for the 2009 board. We have many members who have worked diligently on various activities including Membership Task Force, Audiology Assistant Task Force, Convention Committee and our Fall Conference Committee. Committees like these offer another route to service for members who are interested in working for

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From the Executive Director

"Never doubt that a small group of thoughtful, committed people can change the world. Indeed, it is the only thing that ever has."

-Margaret Mead, anthropologist



Since 1960, the New York State Speech-Language Hearing Association has been the force that unites speech language pathologists and audiologists, amplifying their voices into a message heard clearly in the halls of the state Capitol, legislative offices and regulatory agencies. Advocating for the professions doesn't happen by chance. Skilled lobbying—enhanced by effective public relations efforts—is necessary to make sure our point of view is heard. But most importantly, you are necessary.

Please join us for another year of successes as we advocate for the professions, educate our members and elevate the awareness of the critical services NYSSLHA members provide individuals across all walks of life.

Some of the initiatives that we started this year that will continue into 2008 include:

- Educating our members on the appropriate formation of corporate entities providing professional services, such as speech-language pathology and audiology services;
- Working with the Department of Health to review the Early Intervention Program's auditing process;
- Reinvigorating an Insurance Reimbursement Task Force to outline insurance reimbursement issues that speech-language pathologists and audiologists face; and
- Managing an ASHA grant awarded to NYSSLHA to maintain standards for speech-language pathologists and audiologists in school settings.

In addition to these initiatives carrying forward, the Board of Directors has approved several new projects that I hope you will find exciting—look for a revamped *Communicator*, expect more information to come to you via email (this way we can be much more timely), and enjoy some new and improved functions on our web site. Sorry I can't be more specific, but I am still working out the details and timelines.

I invite you to join us, as we strive to "change the world" by putting forward a unified voice for the professions of speech language pathology and audiology to those that impact the environment we work and serve in.

To renew your membership, you can use the enclosed application, wait for your renewal invoice in the mail or go to the web site and take care of it there. If you choose the online option, go to the Home page, click on Member Login and scroll to the bottom of the page and click on the membership renewal box. You will be asked for your user name and password, so if you have forgotten yours, call the office. We'd be happy to help.

I look forward to working with you in 2008.

Kathy Febraio

NYSSLHA Matters: An Update on Governmental Affairs 2007

by Jack Pickering, Ph.D., CCC-SLP, NYSSLHA Past-President and Chair of Governmental Affairs



Jack Pickering, PhD

In this year's first *Communicator*, I outlined annual goals for governmental affairs. Since that time the NYSSLHA Board and organized groups of NYSSLHA members, as well as our lobbyists and lawyer have been busy addressing these important legislative issues. The information in this article provides an update on governmental affairs, with a focus on three priority topics:

- Corporate entities
- The NYS Early Intervention program's I-PRO review process
- Insurance reimbursement

Formation of Corporate Entities— What Gives?

By Weingarten, Reid and McNally

After hearing from many NYSSLHA members that they were receiving conflicting information on the appropriate formation of corporate entities, the Board of Directors asked NYSSLHA's lawyer Michael Rosen, Esq., to write a summary interpretation of New York State's law on the development of a corporation by individuals or groups who hold a professional license to practice in the state. The following information is based on that interpretation.

Background

A speech language pathologist or audiologist, as well as any other licensed professional has a variety of choices in selecting a legal entity in which to practice one's profession. You may choose to practice as an individual licensed practitioner, form a partnership with another licensed individual or form a corporate entity to enjoy liability and tax advantages.

There are significant limitations under the Business Corporation Law, the Limited Liability Company Law and the Partnership Law for the formation of the professional entities that provide professional services. As a general rule, professional services may only be provided through a **professional service corporation**, a **professional service limited liability company** or a **registered limited liability partnership**.

Service-Providing Corporate Entities in New York State

What are the benefits of forming corporate entities?

A licensed professional, such as a speech-language pathologist or an audiologist, may go into practice alone or as part of a partnership with another professional. Practicing as part of a corporate entity provides both tax and liability advantages.

What options do licensed, service-providing professionals, such as speech-language pathologists and audiologists, have for forming corporate entities in New York State?

Generally, there are three types of entities that may be formed: professional service corporations, professional service limited liability companies or registered limited liability partnerships. These three entities are explained in detail below.

Professional Service Corporations

What is a professional service corporation?

A professional service corporation is a **single-disciplinary corporate entity** that provides professional services. The New York State Business Corporation Law states that one or more individuals licensed in the same profession may form a professional service corporation (in order to render that same professional service). However, individuals licensed in *different* professions may **not** form a professional service corporation. For example, a speech-language pathologist may form a professional service corporation with another speech-language pathologist, but not with an audiologist or occupational therapist.

What paperwork is required in the formation of a professional service corporation?

All professional service corporations must complete a **Certificate of Incorporation** and file it with the Department of State. The Certificate of Incorporation must include the following:

- a. The profession to be practiced by the corporation.
- b. The names and residences of the individuals who are to be the original shareholders, directors and officers.
- c. The license of each original shareholder, director and officer (to be attached).

A copy of this document can be found here:

<http://www.dos.state.ny.us/corp/pdfs/dos1239.pdf>.

Under what provisions may a professional service corporation offer professional services?

All professional service corporations must abide by the following rules when offering services:

- a. All services must be those for which the corporation was formed.
- b. All services must be those explicitly allowed in the Certificate of Incorporation.
- c. All services may be performed *only* by those licensed to perform them.

Thus, if one wanted to perform audiology services through a professional service corporation, he or she would have to form this corporation for the purpose of only offering such services, document these services in the Certificate of Incorporation, and be a licensed audiologist.

What limitations are imposed on professional service corporations?

New York State law prohibits professional service corporations from: (a), issuing shares, and (b), appointing any individual as director or officer unless this individual is licensed in the profession for which the corporation was formed.

Limited Liability Companies

What are limited liability companies?

Aside from professional service corporations, licensed professionals may also provide services through professional service limited liability companies (PSLLCs) or registered limited liability partnerships (LLPs). PSLLCs and LLPs may be **multi-disciplinary**. However, there are limitations that prohibit certain PSLLCs and LLPs from practicing within multiple professions. For example, each member of a PSLLC or LLP formed to practice medicine must be a licensed physician and each member of a PSLLC or LLP formed to provide dental service must be licensed to practice dentistry.

What paperwork is required in the formation of a professional service limited liability company?

The Limited Liability Company Law requires a PSLLC to fill out an **Articles of Organization** to be filed with the Department of State. The Articles of Organization must include the following:

- a. The profession(s) to be practiced by the corporation.
- b. The names and addresses of the original members and managers of the PSLLC.
- c. The licenses of each proposed member and manager (to be attached).

This requirement applies to both the original Articles **and any amendments**. A copy of this document can be found here: www.dos.state.ny.us/corp/pdfs/dos1374.pdf.

What paperwork is required to form a registered limited liability partnership?

A Registered Limited Liability Partnership must file with the Department of State. The registration must include the following:

- a. The name and principal office of the partnership.
- b. The profession or professions to be practiced by the LLP.

This requirement applies to both the original registration **and to any changes**. A copy of the registration forms may be found here: www.dos.state.ny.us/corp/lpfile.html.

Under what provisions may a PSLLC render professional services?

Though a PSLLC allows for varying professional services to be offered, these services may only be offered within certain limitations:

- a. The professional services must be expressly identified in the Articles of Organization.
- b. The professional services are only those that a member or manager of the PSLLC is licensed to perform. This licensed member or manager must either perform these services or oversee a licensed individual who is performing these services. A PSLLC may not provide services that no one on staff is licensed in.

Thus, services in more than one profession may be provided as long as the PSLLC includes a member or manager licensed in each of these professions and identifies these services in its Articles of Organization. As an example, a PSLLC with three members: an audiologist, a speech-language pathologist and a physical therapist may provide services in all of these professions. However, it may not provide occupational therapy because none of its members or managers is licensed in that profession.

Under what provisions may a LLP render professional services?

Basically, the same rules apply to LLPs as to PSLLCs. The partners in a LLP may conduct or transact any business as to which a partnership without limited partners may be formed. However, no LLP may render professional services except through individuals authorized by law to provide such professional services as individuals. The example cited above with the three-member PSLLC applies to LLPs.

What if the Department of Health approves a treatment plan for an early intervention program my company is providing and the plan includes services outside my licensed profession?

The Department of Health is approving the treatment plan and not likely reviewing whether or not your entity can legally provide those services. So, unless the professional

Continued from page 5

service corporation, the PSLLC or LLP, can legally provide those approved services according to its Certificate of Incorporation, Articles of Organization or limited liability partnership registration, the entity would run afoul with the licensing requirements under the Education Law.

How do I determine if the organization that employs me is operating within the law?

If you have any questions regarding the entity for which you work, you should consult your own attorney. Practicing under an improper structure raises serious liability and licensing issues for both you and your employer. It may be necessary for your attorney to contact SED to review your particular circumstances (without giving names) to identify the proper options and/or solutions.

What does this mean for speech-language pathologists and audiologists?

It can be concluded that while a speech-language pathologist or an audiologist may choose to practice as an individual licensed practitioner or form a partnership with another licensed individual, a speech-language pathologist or an audiologist may decide to form a corporate entity to enjoy tax and liability advantages. A speech-language pathologist can collaborate with one or more speech-language pathologists (or an audiologist can collaborate with one or more audiologists) to form a professional service corporation, providing speech-language pathology services and nothing else. Or a speech-language pathologist can collaborate with an occupational therapist and an audiologist, for example, to form a professional service limited liability company (PSLLC) or a registered limited liability partnership (LLP), providing speech-language pathology services, occupational therapy services, and audiology services. The PSLLC or LLP would also have the option of providing social work or certain other services, but only after amending the Articles of Organization or limited liability partnership registration and adding a licensed social worker (or, for another professional service, an individual licensed in that profession) as a member or manager of the PSLLC or partner of the LLP. All entities must complete the requisite paperwork and provide the licenses of their staff to the Department of State.

If you choose to form a corporate entity or to change the professional services you intend to offer, NYSSLHA strongly urges you to seek counsel before proceeding.

Information on this important topic will be presented at the 2008 NYSSLHA Convention in Saratoga, April 10-12 at The Saratoga Hotel and Convention Center.

Early Intervention's I-PRO Review under Review

by Jane Capria Downey, M.S., CCC-SLP and Jack Pickering, Ph.D., CCC-SLP

During visits with the Department of Health (DOH), NYSSLHA has discussed some of our members' experiences with the Early Intervention Program's I-PRO review. Based on these conversations, Brad Hutton, DOH Early Intervention Director, has invited NYSSLHA to speak with him and his staff to learn more about the process from the provider's point of view. The timing couldn't be better; the DOH has just released a Request for Proposal (RFP) titled: *To Conduct Monitoring Activities for Early Intervention and Other Programs and to Review Early Intervention Provider Applications*. The DOH will be reviewing vendor proposals and making decisions by the end of the year. This does not necessarily mean a new EIP auditor will be put in place. The current vendor, I-PRO, could be awarded another contract, but this offers NYSSLHA a unique opportunity to make the EIP staff aware of our experiences as they consider various vendor proposals.

To prepare for that meeting NYSSLHA gathered information from members in private practice and agency owners. These EI providers had more than one audit and reported improvements in the I-PRO audit process over time. NYSSLHA recognizes the challenges facing DOH to keep up with state and national changes (computerized record keeping, Medicaid changes, etc.) that impact EI services. Increased collaboration between the DOH and service providers would help address changes and prevent concerns that the audit process is not transparent enough.

In the spirit of improving the process, the following information will be shared with the staff of the EIP:

- Information on the EIP's interpretation of standards and guidelines prior to an audit would improve the process for both provider and auditor. It is recognized that DOH has been providing more information in certain areas, such as, guidelines on health, safety, and confidentiality, but for other guidelines such as those regarding parent training and collaboration and Medicaid, providers need more explanation on the state's expectations. Without information beforehand, citations from the Department are unexpected; particularly if practitioners believe that they are meeting the spirit of a regulation (e.g., documenting correspondence with families in the child's record).
- The audit process is often perceived as punitive. Providers report that language in a citation ("putting children at risk") is not equivalent to the severity of the problem leading to the citation (e.g., a practitioner

not written adequately in the agency/provider manual). Increased use of positive and constructive language (and recognition of positive practice) will be recommended.

- There appears to be inconsistency across counties as to the depth and quality of guidance provided to clinicians serving families in the EI program. Without consistent, high quality information across the state, there is the potential for regional issues that generate frustration for service providers. The audit process can be an opportunity for education.
- Providers report that there are occasionally citations for problems that are outside the control of the individual provider or agency, like documentation for a physician's physical examination.
- Since both agencies and individual providers are audited, there is some concern that there can be redundancy in the auditing process. For example, if an independent provider is acting on his/her own then it seems reasonable that they would be audited. If a person contracts with agencies he/she would be following the agency policy and procedures, and in this case, it does not seem necessary to audit them separately.

Jane Downey, NYSSLHA's Treasurer and a private practitioner in the EI program, has been gathering information from colleagues around the state, including specific examples that support the concerns of EI providers. This issue is an important one, in part because there are not enough EI providers in certain regions of the state. There is also anecdotal evidence to suggest that some providers are leaving EI, often because of barriers established by the perceived over-regulation of the program by the state and counties. The more objective information we can provide the DOH, the more effective our visit will be. If you wish to contact Jane with your experiences, you can email her at jcdowney@nycap.rr.com.

Increased collaboration between DOH and service providers (whether through NYSSLHA or at a more grassroots level) may help remedy these issues. NYSSLHA appreciates the opportunity to discuss EI and the I-PRO review with the Department of Health. In the upcoming weeks and months, we will report the results of our meeting with Brad Hutton, and more importantly we will continue to advocate for early intervention service providers and the families who benefit from the EI program.

Insurance Reimbursement

by Jack Pickering, Ph.D., CCC-SLP

Insurance reimbursement is an on-going issue for speech-language pathologists and audiologists who provide reimbursable assessment and intervention services. In order to address this important issue, a task force was formed and includes the following NYSSLHA members: Lisa Camillaci, Lois Cook, Kristina Hill, Sue Roberts, Joseph Sonnenberg, Judy Swanson, and me. The task force has outlined the key concerns that face audiologists and speech-language pathologists who rely on insurance reimbursement. Moving forward, we will develop a strategy to take this information to the legislature and insurance department.

- Some insurance companies are taking up to 90 days to determine if a patient is approved for services. In the meantime, the patient receives assessment or intervention, but may not get reimbursed because the insurance company refuses to pay. Sometimes, the reason for non-payment is "too late to submit for payment."
- Pre-certification of patients is a huge administrative burden to a private practice. Individuals and agencies are writing off a considerable amount of money because they give up on fighting the system through the appeal process. Although certification guidelines are national, interpretation is regional and varies across NYS. Many insurance companies follow the Medicare model but interpret the guidelines regionally. It would appear that the Medically Necessity Guidelines (Medicare) need to be streamlined. In the state of CA, there are SLPs who review Medicare claims for approval – could it be done in NYS?
- The process of credentialing speech-language pathologists and audiologists is very long, which affects clinicians who are not yet "in the system." It is also a burden on directors of private practices, who must serve their clients in a timely fashion.
- Insurance companies are changing the terms of contracts without prior notification to the service provider.

Other topics discussed were the relationship between evolving standards of care and changing CPT codes. Rates of reimbursement were, of course, a top priority. For our next steps we will:

- Identify and develop a strategy for interacting with people and resources that can assist NYSSLHA and its members (for example, enlist the help of ASHA's

Continued on page 8

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Seven States Begin Work on Personnel Shortages, Qualifications

cite as:

Boswell, S. (2006, Aug. 15). Seven states begin work on personnel shortages, qualifications. *The ASHA Leader*, 11(10), 1, 32.

by Susan Boswell

ASHA has awarded \$30,000 in grants to seven states—Idaho, Louisiana, Michigan, Oklahoma, Oregon, Tennessee, and Texas—to help address some of the most challenging issues facing states today: maintaining the master's degree as the minimum qualification for speech-language pathologists and audiologists in school settings and personnel shortages.

The grants were awarded as part of the 2006 Focused Initiative for Personnel Issues in Healthcare and Education to the following states which are at the forefront in addressing these issues.

"The proposals from state associations this year were both diverse and innovative," said Eileen Crowe, team leader for the grant program. "The grant review team had some challenging decisions to make as we received a number of excellent proposals."

Idaho

For the past year, Idaho has been laying the groundwork to address personnel issues, gathering data and developing a multi-tiered approach.

A statewide survey of 57 of 109 Idaho school districts conducted by the Idaho Maintenance of Standards Committee showed that 12 districts currently have unfilled positions, and in seven districts, these vacancies have gone unfilled for more than a year. Districts indicated that positions could not be filled because of a shortage of qualified applicants, insufficient salary and benefit packages, geographic location, and caseload size.

Armed with data, Idaho is addressing shortages by hiring a lobbyist and developing a strategy to introduce legislation. "We have selected three areas of possible focus: salary supplements for clinicians in the school setting, loan forgiveness programs for those committing time to employment within schools following graduation, and more funding provided to academic programs," said Erica Hubbard, chair of the Idaho Speech, Language, and Hearing Association (ISHA) Maintenance of Standards Committee.

Louisiana

Compounding the challenges faced by other states in maintaining the master's level standard, Louisiana faces additional obstacles inflicted by Hurricanes Katrina and Rita, noted Christy Fontenot, president of the Louisiana Speech-Language-Hearing Association (LSHA).

"The entire population of many parishes-including SLPs and audiologists-are still evacuated," Fontenot said. "The number of displaced professionals fluctuates daily and there is no accurate accounting of the number evacuating temporarily, how many have returned, and how many have resumed their original jobs."

Prior to the hurricanes, LSHA successfully gained the passage of legislation granting a statewide salary supplement for school-based master's level clinicians-but the act passed unfunded due to budget constraints. LSHA is now rallying to make funding a legislative priority. A lobbyist has been hired to steer the state association through the legislative session as the group continues to educate the governor and legislator about the need for highly qualified professionals. The state association also plans to improve the infrastructure of the legislative committee to activate member response to legislative priorities.

Michigan

In Michigan, anecdotal data about personnel shortages is everywhere, but quantitative data about personnel needs remains elusive, said Sandra Glista, president of the Michigan Speech-Language-Hearing Association. "Anecdotal data about SLP shortages can be heard any time parents, school-based SLPs, principals, or other special education administrators talk about students with communication disorders."

To gain a better understanding of personnel shortages and consider creative solutions, Glista convened an Educational and Personnel Summit with the chairs and directors of all Michigan academic programs. Out of this summit, the Michigan Communication Disorders Personnel Advisory Group was formed with representation from members of the personnel summit as well as other key stakeholders statewide.

The advisory group will forge a partnership to gather data on supply and demand for services and clinicians, join forces with academic programs to meet shortages, and develop recruitment and retention plans for school-based clinicians. In June, advisory group members brainstormed strategies for recruitment and retention such as disseminating a local "grow your own SLP" model, Glista noted.

Oklahoma

The Oklahoma Speech-Language-Hearing Association will kick off efforts to maintain standards and address personnel shortages by bringing key stakeholders to the table. A State Advisory Group of Stakeholders will be established with representation that will include SLPs and speech-language supervisors, parents, and special education directors. The group also will include university representatives, directors of special education, districts, and the department of education.

Together, the group will refine a plan of action that includes gathering current data on shortages, implementing recruitment and retention plans to address those shortages, and educating policymakers on the need for highly qualified professionals. "While we have had the master's level requirement since 1983, we feel that these standards are in jeopardy. Many times certification or hiring decisions are made based on misinformation or ignorance of our profession," said Mona Ryan. "These activities should help bridge the gap of services in all areas of the state."

Oregon

Faced with the closure of two undergraduate and one graduate academic program over the past 25 years and lack of interest in re-establishing a program to reduce shortages, the Oregon Speech and Hearing Association formed the ad hoc committee.

This partnership between representatives of academic programs, clinicians, and administrators will implement a four-pronged approach to maintain standards and address personnel shortages. The group will develop a grassroots recruitment kit, and funds will be used for clinicians to conduct local recruiting efforts. Committee members also will develop recommendations for recruitment and retention strategies, and they will present the kit and recruitment strategies at a statewide special educators' conference later this year.

"Statewide involvement of clinicians in local recruitment efforts using the kit will build a model for all school districts to follow," said Melanie Peters, president of the Oregon Speech and Hearing Association.

Tennessee

The Tennessee Association of Audiologists and Speech-Language Pathologists (TAASLP) has successfully negotiated with a diverse group of stakeholders to maintain the master's-level school SLP credential. In addition, a 2005 ad hoc committee on school SLP shortages resulted in an action plan to address shortages. "At this time, in order to fully implement this action plan, there is a significant need to communicate changes in licensure and employment standards," said Valeria Matlock, TAASLP president.

TAASLP will use the grant to provide training by an expert panel of major stakeholders in four geographically diverse areas of the state. The panel will highlight the new professional personnel standards which require the master's level degree from a graduate program approved by the ASHA Council on Academic Affairs, recruitment and retention strategies, and resources to assist current school clinicians in meeting the new requirements. Training will target school administrators, SLPs in leadership positions, and clinicians working outside the school system.

Texas

To reduce persistent vacancies in the schools, the Texas Speech-Language-Hearing Association (TSHA) has worked steadily to address the root causes of the problem. One challenge is that historically each school district in Texas follows locally determined eligibility criteria. This results in inconsistent and over-identification of students for speech-language services.

To identify the "right" students for the SLP's caseload, TSHA has been developing a series of eligibility criteria in six different areas since 2000. A trainer-of-trainers model is steadily spreading the word among more than 1,000 districts statewide.

Another focus is marketing the professions and school-based practice. With the grant, the joint committee will develop a series of marketing materials to promote school-based practice.



Susan Boswell is an assistant managing editor of The ASHA Leader.

For more information about the new state grants, contact Eileen Crowe, director of state association relations, by phone at 800-498-2071 or by e-mail at ecrowe@asha.org.

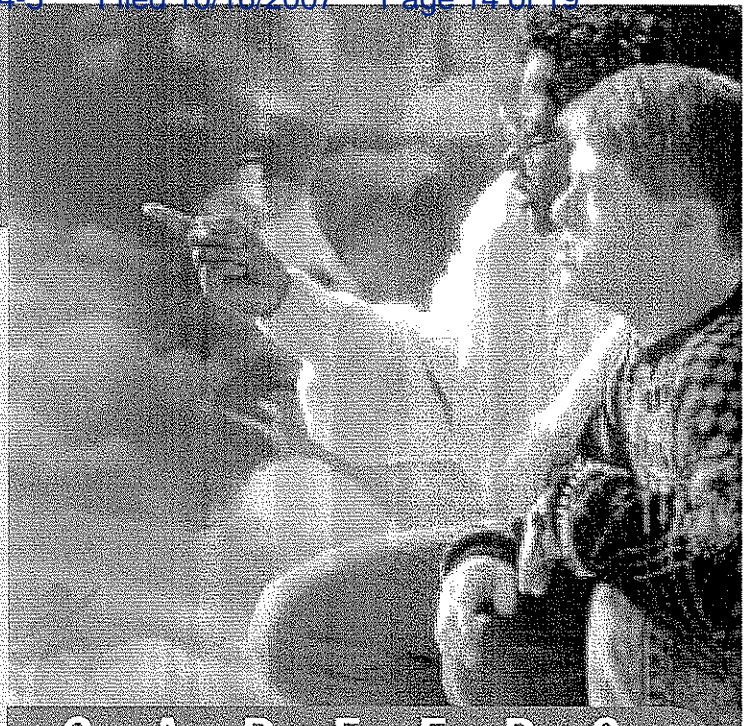
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Speech Language Pathologist

Making
A

DIFFERENCE in the lives
of **students** with
special needs

Eight year old Danny happily waves his arm when his teacher points to pictures of animals. "It's a wabbit!" he proudly announces. His classmates giggle. Danny is embarrassed and withdraws from the discussion for the rest of the morning. Jose was a premature baby who had several developmental delays the first 3 years of life. Although he is now an active and healthy 8 year old, Jose's language skills are markedly slower than most children his age. Reading aloud is difficult and he cannot keep up with his classroom work. Martha, a middle school student, received a brain injury in a car accident. She is returning to school, but her speech is slow and labored.



C A R E E R S

in Special
Education
and Related Services

Danny, Jose, and Martha have speech or language impairments. They are among the 10 million Americans with speech or language disorders. Disabilities range from simple sound repetitions or misarticulations, to the complete inability to speak. The problems can be caused from hearing loss, brain injury, mental retardation, emotional problems, cerebral palsy, and other conditions or illnesses. Through a variety of interventions, speech language pathologists in

schools help students understand their particular disabilities and help them achieve more normal communication. In addition to working with students with disabilities, they may also work with limited English proficient students or dialect speakers who need communication instruction.

Nature of Work

School speech-language pathologists spend most of their time diagnosing disorders, preparing for, and providing direct services. Most caseloads range from 20 to 70 children, and the majority of speech language pathologists work in more than one school. To diagnose problems, speech-language pathologists use written and oral tests as well as special instruments. They may use sign language or computer technology to communicate with students who cannot speak at all.

These professionals are trained to diagnose a variety of disorders.

Speech disorders include:

- fluency disorders - The flow and rhythm of speech is interrupted by hesitations, repetitions, and prolongations of sounds. Stuttering is a fluency disorder.



- articulation or phonological disorders - Sounds are pronounced with difficulty, sounds are omitted (ha for hat), sounds are distorted (sirt for shirt), or one sound is substituted for another (wabbit for rabbit).
- voice disorders - Pitch is inappropriate (too high, too low); or the quality of the voice is inappropriate (harsh, breathy, or nasal).

Language disorders include:

- aphasia - Person has lost speech and language ability, caused by a brain injury
- delayed language - Child is slow in developing age appropriate language skills.

Once a problem is diagnosed, the speech language pathologist may consult with classroom teachers, other health professionals in the school system, and the student's parents. Together, they determine goals for each student and record them on the Individualized Education Program (IEP). As long as the student receives services, the speech language pathologist is required to track the student's progress with detailed written records. Treatment is generally administered in one of three different locations in a private area set aside for the student and speech language pathologist, in a resource room, or in the student's regular classroom. In the first option, called the "pull out" method, one or more students are pulled out of class to receive services.

Articulation skills are commonly practiced in pull out sessions. One speech language pathologist achieved some desired articulation results when she played a board game with three fourth graders. Players took turns rolling dice, advancing to a particular spot on the board, selecting a word card, and then articulating the word correctly. Words became harder as the child progressed toward a "pot of gold." The first child to reach the end was the winner.

A resource room is comprised entirely of special needs students who spend up to 3 hours a day in the resource room and the rest of their school day in a regular classroom. Students with learning disabilities, for example, receive speech language services because their speech and language skills need improving. The speech language pathologist might teach a unit on speech for social occasions. Students would practice "turn taking" etiquette, learn how to interrupt appropriately ("Excuse me, please"), observe and interpret nonverbal communication (body language), and do role playing conversations with different audiences. "Persons use different words and tones while speaking to their best friend than they would if they were talking to the school principal or the President of the United States," noted one speech language pathologist. "Children are not born with these skills. Some learn them easily, and others need help."

Sometimes an entire classroom can benefit from the services of a speech language pathologist. One speech language pathologist (who is also a certified teacher) enjoys preparing a language lesson occasionally for an elementary class rather than

pulling out a single child. One of her students, for example, had a moderate hearing loss. Because the youngster was a good reader, but had difficulty speaking, the speech language pathologist prepared a lesson for everyone using lots of visual clues and then asked them to draw pictures and write interpretations of their drawings. Together, all these activities enhanced the children's language skills.

As communications technology advances, speech language pathologists can serve more students than ever before. A few school systems maintain an inventory of assistive technology devices. They loan equipment such as "talking computers" for students with severe speech and language disabilities.

Education Required

In this profession, a master's degree in speech language pathology is the minimum requirement in almost every state. The 45 states that have state licensure or regulatory requirements for speech language pathologists require a master's degree, 375 hours of supervised clinical experience, a passing score on a national examination, and a supervised clinical fellowship — a post graduate professional experience. Candidates who successfully complete those requirements are awarded the Certificate of Clinical Competence (CCC) by the American Speech Language Hearing Association (ASHA). The CCC is the only professional credential for speech language pathologists that is recognized by every state. However, many states do not require ASHA CCCs in order to work in public schools. In lieu of the above requirements, some of these states require a master's degree and a teaching license to work in the schools.

A few states permit school systems to employ persons with bachelor's degrees in speech language pathology, but federal legislation has mandated that in the next few years almost all speech language pathologists in schools will need a master's degree to practice.

The American Speech Language Hearing Association recommends that undergraduates in this field have a strong liberal arts and sciences background and possess excellent oral and written communication skills. Students should enroll in basic speech language pathology courses. Master's degree programs typically include courses in anatomy and physiology; the development of normal speech, language, and hearing, and the nature of disorders; psychological aspects of communications; and evaluation and treatment methods.

Persons who want to study and do research even further can pursue a doctoral degree in communication sciences.

PRACTITIONER'S PROFILE



Yvette Bullock Language Pathologist Arlington, Virginia

Yvette Bullock is a speech language pathologist at a middle school in Arlington, Virginia. She considered medicine as a profession (her mother is a nurse, her father was an attorney, and her grandfather was a doctor) but her fascination with words and language attracted her to speech pathology. She earned both a bachelor's degree and master's degree in speech language pathology from Florida State University, and has completed some post graduate classes. For the past 14 years, Yvette has been employed by the Arlington County school system.

The enrollment at her school is about 575 students in the 6th, 7th, and 8th grades. Three fourths of the students are minorities (Hispanic, African American, and Asian) and more than two dozen languages are represented. Yvette has studied both Spanish and French, which she finds useful in this strong international setting. Unlike many school speech pathologists who work privately with single students or small groups, Yvette spends up to 90 percent of her day in the classroom. Outside the classroom, she provides therapy to only five students. Her remaining hours are spent in testing, consultation, and meetings.

Daily Schedule: At Yvette's school, special education students attend resource classes and integrated classes. Although Yvette could provide speech and language treatment in math or science classes, she believes that English and language arts classes lend themselves more creatively to the spoken language. In one recent 45 minute English class, the students finished reading a novel with a large cast of characters. The classroom teacher then opened the discussion, calling on various students. Yvette, who had been listening to everyone's comments, concluded the

"Children who can express themselves well and be understood — as well as make sense of their world — will make better progress in school."

teaching. She encouraged the students to use critical thinking and to be articulate as they discussed the novel. One student referred to every male character in the story as "a guy." Yvette helped the student organize his thinking, broaden his vocabulary, be more specific with his descriptions of the characters. "Children who can express themselves well and be understood as well as make sense of their world will make better progress in school," she believes. In her lessons, Yvette also incorporates role playing, comparing and contrasting exercises, listening skills, and proper control of the vocal and respiratory systems.

Challenges: We have many students with different language backgrounds. Some are not fluent in their native language, yet are now learning English. We have children who came from refugee camps, and some who are adjusting to a totally different culture here in the United States. One child, for example, spoke an incorrect sound for every letter of the alphabet. As the speech pathologist, I receive requests from classroom teachers who need advice on how to work with students who having difficulty learning English. Providing as much support as I can, we are learning together how to help these youngsters. The literature in the field increases constantly on this issue, so it's even a challenge to keep up with the most recent research. Another challenge is helping students with poor reading skills. They are often already weary of speech therapy and/or academic failure so I try to find new and different ways to reach them.

Satisfaction: "When I work very closely with the classroom teacher, I can see real change in certain children during the school year. And over a 3 year period here, the progress is very evident. Except for moderate to severe articulation, voice, or fluency problems, when a pull-out is valid, I think it's wiser not to pull kids out of their classroom and do therapy in isolation. In middle school, many kids don't want to be singled out for any kind of treatment. Providing speech therapy in a classroom is more work for me and requires more creativity, but it really is effective. I see the kids improve and enrich their language just by listening to one another."

Personal Qualities

Since speech language pathologists working in schools provide services primarily to students under age 12, persons considering this career should genuinely enjoy working with children. Speech language pathologists are mature, patient, resourceful, and skillful in managing detailed paperwork. They are good team players who frequently collaborate with classroom teachers, parents, and other health professionals. If their caseload includes children who are learning English as a second language, speech language pathologists can expect to work closely with classroom teachers and be up date with the current professional literature on the subject.

Job Outlook and Advancement

Employment of speech language pathologists in all settings is expected to increase faster than average for all occupations through 2005. In 1992, U.S. schools employed 37,164 speech language pathologists and audiologists. The Department of Labor predicts that as many as 49,000 will be needed by schools in 2005. The American Speech Language Hearing Association polled a representative sample of its school based members in 1996 about the shortages of speech language pathologists in their school districts. Sixty percent of the respondents said their district had funded but unfilled positions. The need was greatest in urban districts.

Speech language pathologists are also employed full-time or part-time in hospitals and rehabilitation centers, clinics, nursing homes, home health agencies, research laboratories, state and federal agencies, colleges, and in private practice.

How to Prepare for a Career

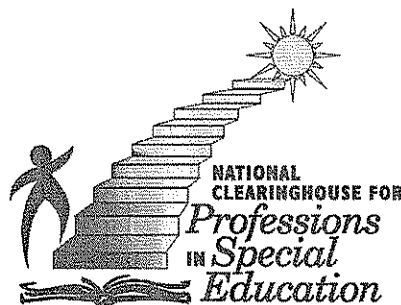
High school students considering a career in speech language pathology will benefit from a strong background in science and by developing excellent communication skills. Classes in public speaking and English are especially recommended. Students can also volunteer to work with children in a variety of settings. Speech language pathologists employed in schools can suggest particular organizations or clubs that work with special needs children. Some of these might welcome teenage volunteers.

RESOURCES

American Speech Language Hearing Association
10801 Rockville Pike
Rockville, Maryland 20852
1-800-638-8255
www.asha.org

National Information Center on Deafness
Gallaudet University
800 Florida Avenue, N.E.
Washington, DC 20002
(202) 651-5051
(202) 651-5052 TTY
www.gallaudet.edu/~nicd

National Clearinghouse for Professions in Special Education
1110 North Glebe Road, Suite 300
Arlington, Virginia 22201-5704
1-800-641-7824
E-mail: ncpse@cec.sped.org
www.special-ed-careers.org



1110 N. Glebe Road, Suite 300
Arlington, Virginia 22201-5704
800.641.7824
TTY: 866.915.5000
FAX: 703.264.1637
ncpse@cec.sped.org
www.special-ed-careers.org



Photographs by Aneeta Brown.

The National Clearinghouse for Professions in Special Education is the descriptive title for the National Clearinghouse on Careers and Professions Related to Early Intervention and Education for Children with Disabilities; Cooperative Agreement H326P980002 between the U.S. Department of Education and the Council for Exceptional Children. The contents of this publication do not necessarily reflect the views or policies of either the U.S. Department of Education or the Council for Exceptional Children. This information is in the public domain unless otherwise indicated. Readers are encouraged to copy and share it, but please credit the National Clearinghouse for Professions in Special Education.

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Shortages in Health Care Add Challenges

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by Janet Brown

Last year, 40% of surveyed speech-language pathologists in health care indicated that their workplace currently had an open, unfilled position (ASHA Health Care Survey, 2005). This high vacancy rate reflects an increase from 25% in 2002 (ASHA Health Care Survey, 2002). Shortages of SLPs exacerbate the challenges of working in health care by increasing workloads, stress levels, and the potential for ethical conflicts and encroachment by other professionals.

Health care facilities compete with each other and even with schools to attract and retain qualified SLPs. Companies woo SLPs by mail and phone, offering sign-on bonuses, relocation allowances, and other perks to entice them away from their current positions. While some facilities may have a pipeline of potential employees from practicum affiliations with local universities or are located in a major city that may attract SLPs, many smaller communities or rural areas lack a pool of candidates from which to draw.

ASHA's Focused Initiative for Personnel Issues in Health Care and Education has sought to gather and address factors contributing to the current shortages. These efforts have fallen into the following categories:

Information on Shortages

Meetings and conference calls have been held with different groups of leaders, stakeholders, and experts to gather information on shortages:

- Leaders in state speech and hearing associations
- ASHA's Medicare Intermediary Consultants
- SLPs based in hospitals and long-term care settings
- National associations (Easter Seals, Visiting Nurses of America, and the National Association for Home Care and Hospice)
- State hospital associations
- State health and labor departments
- State Early Intervention agencies

Many state and national agencies acknowledged that SLPs are in short supply, but have focused

American Speech Language Hearing Assoc.

their resources on what they consider more urgent needs, such as the shortage of nurses. Early intervention agencies across states were most keenly aware of the impact of vacancies for SLP positions.

A two-day forum of ASHA members from health care, schools, and universities was held Sept. 28-30 to share solutions and develop additional strategies. A report on the forum will appear in an upcoming issue of *The ASHA Leader*.

Recruitment/Retention Resources

Recruitment/retention packets for different settings are available to assist ASHA members or hiring managers in understanding the current job market and provide tips for recruiting. ASHA's 2005 Health Care Survey provides useful information about productivity, salaries and hourly rates, and vacancies. A new brochure, "Reward Yourself with a Career in Health Care," introduces speech-language pathology and audiology to students in elementary through high school grades. Members can request up to 25 free brochures for school fairs by contacting the Action Center at Actioncenter@asha.org.

Awareness of Speech-Language Pathology

Articles written by ASHA members and staff were published by other professional groups and trade associations to promote the various aspects of the role of SLPs in health care. This year articles were placed in print or electronic publications of the American Academy of Pediatrics, the American Health Care Association, and the National Association on Home Care and Hospice, as well as in *Advance for Directors in Rehabilitation*, *Home Healthcare Nurse*, and *Stroke Connection*.



The Focused Initiative will continue in 2007 with additional strategies based on information that continues to be gathered. For more information, or to provide your suggestions, contact Janet Brown at jbrown@asha.org, Amy Hasselkus at ahasselkus@asha.org, or Penny Gershman at pgershman@asha.org.